

D-3150

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Champion, Mary J.

Serial No. 10/576,803

Filing Date: April 21, 2006

For: SYSTEMS AND METHODS FOR  
TREATING HOT FLASHES ASSOCIATED  
WITH MENOPAUSE

) Group Art Unit: 1615

) Examiner: Isis Ghali

I hereby certify that this correspondence is being  
deposited with the United States Postal Service  
with sufficient postage as first class mail in  
an envelope addressed to: Commissioner for Patents,  
PO Box 1450, Alexandria, VA 22313-1450, on or before

Date

June 29, 2007

Alicia Curran

Request for One-Month Extension of Time

Commissioner for Patents

P.O. BOX 1450

Alexandria, VA 22313-1450

Dear Sir:

Applicant hereby requests an extension of time under 37  
C.F.R. 1.136(a) of **one month** for replying to an office action  
dated April 5, 2007, of which a shortened statutory period for  
reply for two months was set.

07/05/2007 EAREGAY1 00000002 10576803

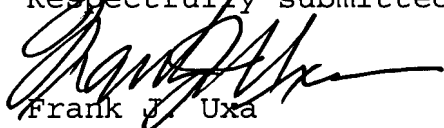
01 FC:2251

60.00 0P

D-3150  
10/576,803

The requisite fee of \$60 is enclosed herewith. In addition, authorization is hereby given to charge Deposit Account No. 21-0890 for any deficiency or to credit any overpayment.

Respectfully submitted,



Frank J. Uxa  
Attorney for the Applicant  
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LAF



# FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

## Complete if Known

|                      |                |
|----------------------|----------------|
| Application Number   | 10/576,803     |
| Filing Date          | April 21, 2006 |
| First Named Inventor | CHAMPION       |
| Examiner Name        | Ghali, Isis    |
| Art Unit             | 1615           |
| Attorney Docket No.  | D-3150         |

☒ Application claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 60.00

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number 21-0890 Deposit Account Name Frank J. Uxa

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) associated with this communication

☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |
| Subtotal (1)     |             |                       |             |                       |                  |                       | 0              |

### 2. EXCESS CLAIM FEES

| Fee Description   | Small Entity |          |
|---|--------------|----------|
|   | Fee (\$)     | Fee (\$) |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent            | 50           | 25       |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200          | 100      |
| Multiple Dependent Claims   | 360          | 180      |
| Total Claims  | Extra Claims | Fee (\$) |
| -20 or HP =   | x            |          |
| HP = highest number of total claims paid for, if greater than 20  |              |          |
| Indep. Claims   | Extra Claims | Fee (\$) |
| -3 or HP =  | x            |          |
| HP = highest number of independent claims paid for, if greater than 3                                   |              |          |
| Subtotal (2)  |              | 0        |

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| -100 =       | /50=         | (round up to a whole number)                     | x        |               |
| Subtotal (3) |              |  |          | 0             |

### 4. OTHER FEE(S)

|  |              |
|--|--------------|
| <input type="checkbox"/> Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)                             |              |
| <input type="checkbox"/> Non-English Specification: \$130 fee (no small entity discount)   |              |
| <input checked="" type="checkbox"/> 1-month extension of time: \$120 fee (\$60 small entity discount)  | 60.00        |
| <input type="checkbox"/> 2-month extension of time: \$450 fee (\$225 small entity discount)  |              |
| <input type="checkbox"/> 3-month extension of time: \$1020 fee (\$510 small entity discount)   |              |
| <input type="checkbox"/> 4-month extension of time: \$1590 fee (\$795 small entity discount)   |              |
| <input type="checkbox"/> 5-month extension of time: \$2160 fee (\$1080 small entity discount)  |              |
| <input type="checkbox"/> Information Disclosure Statement Fee: \$180 fee (no small entity discount)  |              |
| <input type="checkbox"/> Notice of Appeal: \$500 fee (\$250 small entity discount)   |              |
| <input type="checkbox"/> Filing a Brief in Support of Appeal: \$500 fee (\$250 small entity discount)  |              |
| <input type="checkbox"/> Request for Oral Hearing: \$1000 fee (\$500 small entity discount)  |              |
| <input type="checkbox"/> Utility Issue Fee: \$1400 fee (\$700 small entity discount)   |              |
| <input type="checkbox"/> Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount) |              |
| <input type="checkbox"/> Request for Continued Examination: \$790 fee (\$395 small entity discount)  |              |
| <input type="checkbox"/> Other: _____  |              |
| <b>Subtotal (4)</b>  | <b>60.00</b> |

## SUBMITTED BY

|                   |              |                                   |        |           |              |
|-------------------|--------------|-----------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Frank J. Uxa | Registration No. (Attorney/Agent) | 25,612 | Telephone | 949-450-1750 |
| Signature         |              |                                   |        | Date      | 6/29/07      |